PTO/SB/06 (08-00) Approved for use through 10/31/2002. OMB 0651-0032 U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD -15571-1US OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY OR **SMALL ENTITY** (Column 2) (Column 1) NUMBER FILED NUMBER EXTRA RATE FEE FOR **RATE** FEE BASIC FEE _{\$} 370 OR \$ (37 CFR 1.16(a)) TOTAL CLAIMS 8 x 💲 9 28 72 x \$ 18 minus 20 = OR (37 CFR 1.16(c)) INDEPENDENT CLAIMS 1 42 = 4 42 80 minus 3 = OR (37 CFR 1.16(d)) MULTIPLE DEPENDENT CLAIM PRESENT OR 0 484 TOTAL OR TOTAL * If the difference in column 1 is less then zero, enter "0" in column 2 OTHER THAN CLAIMS AS AMENDED - PART II **SMALL ENTITY** OR SMALL ENTITY (Column 1) (Column 2) (Column 3) **CLAIMS HIGHEST** ADDI-ADDI-REMAINING NUMBER **PRESENT** RATE TIONAL RATE TIONAL **AMENDMENT EXTRA AFTER** PREVIOUSLY FEE FEE AMENDMENT PAID FOR OR Total Minus (37 CFR 1.16(c)) OR Independent Minus (37 CFR 1.16(b)) OR (37 CFR 1.16(d)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR **TOTAL** TOTAL n OR 0 ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS HIGHEST** ADDI-ADDI-B REMAINING PRESENT NUMBER **RATE** TIONAL RATE TIONAL **AMENDMENT AFTER PREVIOUSLY EXTRA FEE** FEE AMENDMENT PAID FOR OR Total Minus = (37 CFR 1.16(c)) OR Independent *** Minus OR (37 CFR 1.16(b)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL 0 OR 0 ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING PRESENT NUMBER **RATE** TIONAL TIONAL RATE **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total (37 CFR 1.16(c)) Minus OR Independent *** Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL **TOTAL** 0 0 OR

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

ADDIT. FEE

ADDIT. FEE

REST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

9-15571-108

CLAIMS AS FILED - PART I (Column 1) (column 1)						mn 2)	SMALL TYPE	SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			28				RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FE	E 370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			28 minus 20=		* 8		X\$ 9=	72	OR	X\$18=	
INDEPENDENT CLAIMS			√ minus 3 =		* 1		X42=	42	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							+140=		OR	+280=	
* If the difference in column 1 is less than zero, ente					r "0" in c	column 2	TOTAL		OR	TOTAL	
	C	LAIMS AS A	MENDED	IENDED - PART II				<u> </u>		OTHER	THAN
		(Colum			(Column 3) SMALL		ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	I CLAIM		+140=		OR	+280=	
							TOTA			TOTAL	
	(Column 1) (Column 2) (Column 3						ADDIT. FE	E	10	ADDIT. FEE	
AMENDMENT B		(Column 1) CLAIMS			HEST	(Column 3)		ADDI-	1		ADDI-
	Ann strangenharman common com	REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA	RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDEN	CLAIM		+140=		OR	+280=	
							TOTA ADDIT. FE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=-	X42=		1	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM				OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
										TOTAL ADDIT. FEE	
		nher Previously Pa					r found in the	appropriate bo	ox in co	olumn 1.	